## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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appropriate. All future	ed below or directed oth	IV ING PAIGNI ANVANCE N	rdere and notification of r	naintananaa taan u		modified to the firmers	hould be completed where correspondence address as trate "FEE ADDRESS" for
CURRENT CORRESPOND	ree	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
22917		Cer	tificat	e of Mailing or Trans	mission		
MOTOROLA,	I he	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope					
Penny Tomko 1303 EAST ALGONQUIN ROAD IL01/3RD				addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
SCHAUMBUR	G, IL 60196					- ***	(Depositor's name)
		•	<u> </u>				(Signature)
	<del></del>	<b>T</b>					(Date)
APPLICATION NO.			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/733,221 TITLE OF INVENTION	10/733,221 12/11/2003 TITLE OF INVENTION: OPPORTUNISTIC POWER SUPPLY O		Alistair Hamilton		SBL01166 8007		
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	02/23/2011
EXAMINER		ART UNIT	CLASS-SUBCLASS				
BOATENG, ALEXIS ASIEDUA		2858	320-108000				
CFR 1.363).	ence address or indication	For printing on the patent front page, list     (1) the names of up to 3 registered patent attorneys					
	ondence address (or Cha 3/122) attached.		or agents OR, alternatively,  (2) the name of a single firm (having as a member a 2				
"Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	ication (or "Fee Address" 2 or more recent) attach	'Indication form ed. Use of a Customer	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON T	THE PATENT (print or typ	ne)			
PLEASE NOTE: Unl recordation as set fort	less an assignee is identi h in 37 CFR 3.11. Comp	fied below, no assignee letion of this form is NO	data will appear on the part of the part o	ntent. If an assign	ee is ic	dentified below, the de	ocument has been filed for
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Symbol Technologies, Inc. Holtsville, New York							
Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s)	are submitted:	<b>4</b> b	. Payment of Fee(s): (Plea	se first reapply an	y prev	viously paid issue fee	shown above)
Issue Fee		A check is enclosed.					
Advance Order -	o small entity discount p	Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 502117 (enclose an extra copy of this form).					
5. Change in Entity Stat	tus (from status indicated		o respusitions, to Beper	A Trooduit I tambe		Concrete the	oxide copy of and formy.
	s SMALL ENTITY statu		b. Applicant is no long				
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Authorized Signature	/Michael J.	. Giannetta/	,	Date 201	0-1	2-08	
Typed or printed name	Michael J.	Giannetta		Registration N	o. <u>4</u>	2574	
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